

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

ALAMEDA COUNTY TREASURER

1221 OAK STREET

OAKLAND CA

94612

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.03911791

Gross Claim	\$	1,500,063.36
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,500,063.36
YTD Amount:	\$	6,884,464.70

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

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PAYMENT ISSUE DATE: 2/27/2012

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00010612

Gross Claim	\$	4,069.41
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	4,069.41
YTD Amount:	\$	18,676.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

AMADOR COUNTY TREASURER

810 COURT STREET

JACKSON CA

95642

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00132859

Gross Claim	\$	50,947.74
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	50,947.74
YTD Amount:	\$	233,822.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
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BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00893807

Gross Claim	\$	342,750.20
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	342,750.20
YTD Amount:	\$	1,573,034.69

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00136297

Gross Claim	\$	52,266.12
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	52,266.12
YTD Amount:	\$	239,872.19

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COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00106887

Gross Claim	\$	40,988.20
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	40,988.20
YTD Amount:	\$	188,113.82

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CLAIM SCHEDULE NUMBER: 1100249A
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CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ CA 94553

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.02011996

Gross Claim	\$	771,544.67
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	771,544.67
YTD Amount:	\$	3,540,965.22

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DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00127154

Gross Claim	\$	48,760.03
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	48,760.03
YTD Amount:	\$	223,781.41

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EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA 95667

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00494732

Gross Claim	\$	189,716.00
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	189,716.00
YTD Amount:	\$	870,691.99

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FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.02544470

Gross Claim	\$	975,733.68
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	975,733.68
YTD Amount:	\$	4,478,080.60

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GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00122313

Gross Claim	\$	46,903.64
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	46,903.64
YTD Amount:	\$	215,261.90

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HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00862800

Gross Claim	\$	330,859.87
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	330,859.87
YTD Amount:	\$	1,487,966.83

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IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA

92243 2863

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00880356

Gross Claim	\$	337,592.11
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	337,592.11
YTD Amount:	\$	1,549,361.69

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INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA 93526

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00165904

Gross Claim	\$	63,619.58
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	63,619.58
YTD Amount:	\$	291,977.47

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KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01721220

Gross Claim	\$	660,040.13
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	660,040.13
YTD Amount:	\$	3,029,219.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

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KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00445852

Gross Claim	\$	170,971.88
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	170,971.88
YTD Amount:	\$	784,667.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00199460

Gross Claim	\$	76,487.38
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	76,487.38
YTD Amount:	\$	351,035.18

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LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00134019

Gross Claim	\$	51,392.57
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	51,392.57
YTD Amount:	\$	235,863.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.31055682

Gross Claim	\$	11,908,992.74
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	11,908,992.74
YTD Amount:	\$	54,655,721.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00444444

Gross Claim	\$	170,431.95
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	170,431.95
YTD Amount:	\$	782,188.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00978123

Gross Claim	\$	375,083.04
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	375,083.04
YTD Amount:	\$	1,716,699.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA 95338

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00071281

Gross Claim	\$	27,334.29
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	27,334.29
YTD Amount:	\$	125,449.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

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Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00285164

Gross Claim	\$	109,352.49
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	109,352.49
YTD Amount:	\$	501,867.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

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CLAIM SCHEDULE NUMBER: 1100249A
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MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Sales Tax-Local Realignment, Public Health

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Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00629714

Gross Claim	\$	241,477.85
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	241,477.85
YTD Amount:	\$	1,108,250.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA

96101

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00079120

Gross Claim	\$	30,340.33
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	30,340.33
YTD Amount:	\$	139,246.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA 93517

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00114139

Gross Claim	\$	43,769.14
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	43,769.14
YTD Amount:	\$	200,876.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00812079

Gross Claim	\$	311,409.77
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	311,409.77
YTD Amount:	\$	1,429,199.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

NAPA COUNTY TREASURER
1195 THIRD STREET ROOM 108

NAPA CA 94559 3035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00419177

Gross Claim	\$	160,742.75
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	160,742.75
YTD Amount:	\$	737,720.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA 95959

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00269975

Gross Claim	\$	103,527.93
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	103,527.93
YTD Amount:	\$	475,136.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.06443975

Gross Claim	\$	2,471,085.70
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,471,085.70
YTD Amount:	\$	11,340,922.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00380643

Gross Claim	\$	145,966.03
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	145,966.03
YTD Amount:	\$	669,902.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00113417

Gross Claim	\$	43,492.27
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	43,492.27
YTD Amount:	\$	194,105.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.03289207

Gross Claim	\$	1,261,319.66
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,261,319.66
YTD Amount:	\$	5,788,761.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.03445504

Gross Claim	\$	1,321,255.23
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,321,255.23
YTD Amount:	\$	6,063,834.06

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA

95023

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00159151

Gross Claim	\$	61,029.99
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	61,029.99
YTD Amount:	\$	280,093.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN BERNARDINO COUNTY TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.03996868

Gross Claim	\$	1,532,688.03
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,532,688.03
YTD Amount:	\$	7,034,194.20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.07799922

Gross Claim	\$	2,991,053.76
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,991,053.76
YTD Amount:	\$	13,727,289.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.05924516

Gross Claim	\$	2,271,887.58
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	2,271,887.58
YTD Amount:	\$	10,426,713.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01529153

Gross Claim	\$	586,387.77
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	586,387.77
YTD Amount:	\$	2,691,198.39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00459189

Gross Claim	\$	176,086.25
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	176,086.25
YTD Amount:	\$	808,138.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01397274

Gross Claim	\$	535,815.83
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	535,815.83
YTD Amount:	\$	2,459,099.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00838718

Gross Claim	\$	321,625.09
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	321,625.09
YTD Amount:	\$	1,476,082.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.03392573

Gross Claim	\$	1,300,957.66
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	1,300,957.66
YTD Amount:	\$	5,970,679.39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00556854

Gross Claim	\$	213,538.07
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	213,538.07
YTD Amount:	\$	980,022.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00771515

Gross Claim	\$	295,854.61
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	295,854.61
YTD Amount:	\$	1,357,809.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00026776

Gross Claim	\$	10,267.85
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	10,267.85
YTD Amount:	\$	47,123.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00208334

Gross Claim	\$	79,890.31
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	79,890.31
YTD Amount:	\$	366,652.54

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01114864

Gross Claim	\$	427,519.42
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	427,519.42
YTD Amount:	\$	1,962,079.92

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01734411

Gross Claim	\$	665,098.52
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	665,098.52
YTD Amount:	\$	3,042,340.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01168672

Gross Claim	\$	448,153.30
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	448,153.30
YTD Amount:	\$	2,056,776.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

SUTTER COUNTY TREASURER
PO BOX 546

YUBA CITY CA 95992

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00403600

Gross Claim	\$	154,769.41
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	154,769.41
YTD Amount:	\$	710,306.37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA

96080

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00274331

Gross Claim	\$	105,198.33
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	105,198.33
YTD Amount:	\$	482,802.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

TRINITY COUNTY TREASURER
PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00117460

Gross Claim	\$	45,042.65
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	45,042.65
YTD Amount:	\$	206,720.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01120898

Gross Claim	\$	429,833.30
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	429,833.30
YTD Amount:	\$	1,972,699.56

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00211075

Gross Claim	\$	80,941.41
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	80,941.41
YTD Amount:	\$	371,475.12

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.01334317

Gross Claim	\$	511,673.56
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	511,673.56
YTD Amount:	\$	2,348,299.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00370280

Gross Claim	\$	141,992.11
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	141,992.11
YTD Amount:	\$	651,666.67

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA 95901 5273

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00354044

Gross Claim	\$	135,766.05
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	135,766.05
YTD Amount:	\$	623,092.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00143778

Gross Claim	\$	55,134.88
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	55,134.88
YTD Amount:	\$	253,038.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

LONG BEACH CITY TREASURER

333 W OCEAN BL

LONG BEACH CA 90802

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00644648

Gross Claim	\$	247,204.63
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	247,204.63
YTD Amount:	\$	1,134,533.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100249A
PAYMENT ISSUE DATE: 2/27/2012

PASADENA CITY TREASURER

PO BOX 7115

PASADENA CA

91109 7215

Allocation of Sales Tax-Local Realignment, Public Health

Section 17603(B) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Health Account.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML)

Collection Period 1/16/2012 TO: 2/15/2012

Total amount collected:	\$294,901,470.13	Percentage of collection:	0.13003403
Gross monthly apportionment:	\$38,347,226.61	County/City Ratio:	0.00212606

Gross Claim	\$	81,528.50
County Medical Services Program Offset	\$	0.00
Net Claim / Payment Amount	\$	81,528.50
YTD Amount:	\$	374,171.49